Package:

'Laserform'

Resignation of director or secretary

by Laserform International Ltd.

(NOT for appointment (use Form 288a) or change of particulars (use Form 288c))

Please complete in typescript, or in bold black capitals.

**Company Number** 

00933605

**Company Name in full** 

SUNRISE MEDICAL LIMITED.



Resignation form

Date of resignation 07 Month Year

97

Resignation as director

Day

as secretary

Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.

288b

NAME

\*Style / Title

MR

\*Honours etc

Please insert details as previously notified to

Forename(s)

JULIA N.

11

CHARLES

Companies House.

Surname

COBBLEDICK

Day

17

Month

Year

†Date of Birth

07 55

If cessation is other than resignation, please state reason

Voluntary details. † Directors only.

Signed

A serving director, secretary etc must sign the form below.

Date

HNW 199

(by a serving director/secretary/administrator/administrative receiver/receivermanager/receiver)

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

PETER RILEY, SUNRISE MEDICAL LTD,

HIGH STREET, WOLLASTON, STOURBRIDGE

MIDLANDS, DY8 LLPS.

Tel

01384 445566

DX number

DX exchange

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh



Laserform International 1/96